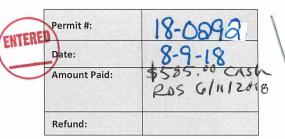
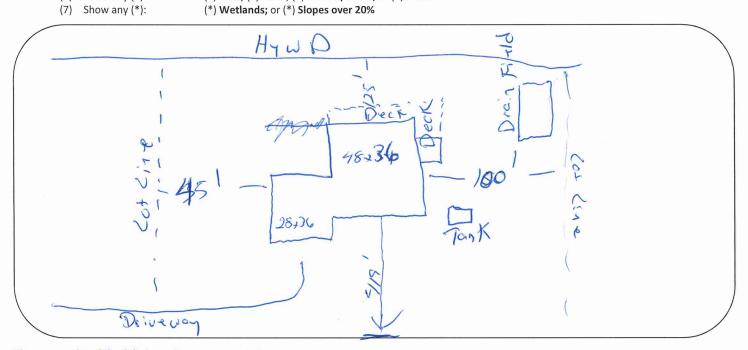
SUBMET: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO: **Bayfield County** Planning and Zoning Depart. PO Box 58 Washburn, WI 54891 (715) 373-6138

**APPLICATION FOR PERMIT** BAYFIELD COUNTY, WISCONSIN Date Stamp (Received) JUN 1 1 2018 Bayfield Co. Zoning Dept.



Checks are made paya	ble to: Ba	yfield Co	ounty Zoning D	epartment.	TO APP	LICANT.		FILL OU	T IN IN	K (NO PE	NCIL)		
TYPE OF PERMIT R	EQUEST	ED-	X LAND	USE 🗆 SA	NITARY	Y D PRIVY	CONDITION	AL USE   SPECIAL	USE	□ B.O.	A. 🗆	OTHER	
Owner's Name:					Mailir	ng Address:	City	/State/Zip:			Telepho	ne:	07
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Address of Property:		7			City/S	090 Chicago	UTIVE.	- 1101 (113		1001	Cell Pho	ne:	
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Contractor:	16	901	Day	1CC	_		lumber:	1021			Dlumba	r Phone:	
M. c	11		,		Contr	A glove	unde	Plumber Phone:					
Authorized Agent: (P	erson Sign	ing Applic	ation on behalf	of Owner(s))	Agent		Agent Mailing A	ddress (include City/State	z/Zip):		Written	Authorizati	ion
,		0 11					5	,	1		Attache	d	
					Tour				Dana	uded Deess	☐ Yes		
PROJECT	Legal I	Descript	ion: (Use Ta	x Statement)	Tax II	<u>J#</u>						nowing Owne	
LOCATION						7/08	3		_		Z_ T_	, 100	
1/4,	1	14	Gov't Lot	Lot(s)	CSM	Vol & Page CSN	1 Doc # Lot	(s) No. Block(s) No.	Subo	livision:			
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Section	, Towr	ısnıp	N, Ra	inge \	w	Namal	9900		2	310		2.310	0
				i 300 feet of Riv f Floodplain?		eam (incl. Intermittent)	700	ucture is from Shorelin			erty in	Are Wet	
☐ Shoreland →											iin Zone? Yes	Prese	
	Is P	Property/Land within 1000 feet of La				nd or Flowage	Distance Str	ucture is from Shorelin	ie : feet			Z/N	
					ar y	continue -			icet			3	
☐ Non-Shoreland													
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material								المعجب المساملية فيما					
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		perty	/		✓ Year Round								
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(are) responsible for the result of Bayfield County property at any reasonal Owner(s):	detail and a y relying on ble time for	accuracy of this inform the purpo	FAILURE TO ny accompanying f all information I mation I (we) am se of inspection	OBTAIN A PERMI g information) has be I (we) am (are) provid (are) providing in or	T <u>or</u> STAR een examir iding and th r with this	RTING CONSTRUCTION Ined by me (us) and to the bhat it will be relied upon by application. I (we) consent	est of my (our) knov Bayfield County in a to county officials c	AIT WILL RESULT IN PENAL Wedge and belief it is true, corr determining whether to Issue a harged with administering cour	ect and o permit. nty ordina	l (we) further	accept liab access to t	lity which may he above descri	be a
(If there are Multi	ple Owne	ers listed	on the Deed	All Owners must	t sign <u>or</u>	letter(s) of authorizat	ion must accom	pany this application)					
				1					_				
Authorized Agent	•								Da	ate			
		u are cie	ning on heha	If of the ownerle	a lette	er of authorization mus	st accompany th	is application)					



Please complete (1) – (7) above (prior to continuing)

(8) Setbacks: (measured to the closest point)

Changes in plans must be approved by the Planning & Zoning Dept.

Description	Measuren	nent		Description	Measur	ement
	1				1	
Setback from the <b>Centerline of Platted Road</b>	15	Feet		Setback from the Lake (ordinary high-water mark)	213	Feet
Setback from the Established Right-of-Way	1401	Feet		Setback from the River, Stream, Creek	-	Feet
				Setback from the Bank or Bluff		Feet
Setback from the <b>North</b> Lot Line	100	Feet				
Setback from the <b>South</b> Lot Line	451	Feet		Setback from Wetland	400	Feet
Setback from the <b>West</b> Lot Line	2131	Feet		20% Slope Area on the property	☐ Yes	⊠No
Setback from the <b>East</b> Lot Line	4191	Feet		Elevation of <b>Floodplain</b>		Feet
Setback to <b>Septic Tank</b> or <b>Holding Tank</b>		Feet		Setback to <b>Well</b>	GARAON	~ Feet
Setback to <b>Drain Field</b>		Feet		The state of the s		
Setback to Privy (Portable, Composting)						

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.

For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.

The local Town, Village, City, State or Federal agencies may also require permits.

Issuance Information (County Use Only)	Sanitary Number:		# of bedrooms:	Sanitary Date:				
Permit Denied (Date):	Reason for Denial:	Reason for Denial:						
Permit #: 18 - 029@	Permit Date: 8-9-	18						
Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming  Yes (Deed of Continuous Continuou		Mitigation Required Mitigation Attached		Affidavit Required Affidavit Attached ☐ Yes ☑ No →				
Granted by Variance (B.O.A.)  ☐ Yes		Previously Granted by  Yes No	y Variance (B.O.A.) Case	#:				
	No	Were Property Line	es Represented by Owner Was Property Surveyed	Yes No				
Inspection Record: 11,0 -> House 230 - Septic ?				Zoning District ( ) Lakes Classification ( )				
Date of Inspection: 6/21/18	Inspected by:	bell		Date of Re-Inspection:				
Condition(s): Town, Committee or Board Conditions	Attached?	No show and to be atta	school )					
Signature of Inspector:	contracted UI	UDC permit from DC inspection agent to the start of construtain setbacks.	cy must be	Date of Approval:				
Signature of Inspector.				6/28/16				
Hold For Sanitary: Hold For TBA:	Hold For Affi	davit: 🗌	Hold For Fees:	_				

own, City, Village, State or Federal Permits May Also Be Required

LAND USE - X **SANITARY - 18-77S** SIGN -SPECIAL -CONDITIONAL -BOA -

## **BAYFIELD COUNTY** PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

Issued To: Robb & Mary Jung 18-0292 No. Town of **Namakagon** 43 Range 6 W. Township N. Location: Section  $\frac{1}{4}$  of -CSM# 1903 2 Subdivision Block Lot Gov't Lot

For: Residential Use: [ 1- Story; Residence (48' x 36') = 1,728 sq. ft.; Deck (8' x 28') = 224 sq. ft.; Attached Garage (28' x 36') = 1,008 sq. ft. ] Total Overall = 2,960 sq. ft.

(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): A UDC permit from the locally contracted UDC inspection agency must be obtained prior to the start of construction. Must meet and maintain setbacks.

NOTE: This permit expires one year from date of issuance if the authorized construction work or land use has not begun.

> Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not

completed or if any prohibitory conditions are violated.

**Tracy Pooler** 

Authorized Issuing Official

August 9, 2018

Date

SUBMIT: <u>COMPLETED</u> APPLICATION, TAX STATEMENT AND FEE TO:

**Bayfield County** Planning and Zoning Depart. PO Box 58 Washburn, WI 54891 (715) 373-6138





Permit #: Date: Amount Paid: Refund:

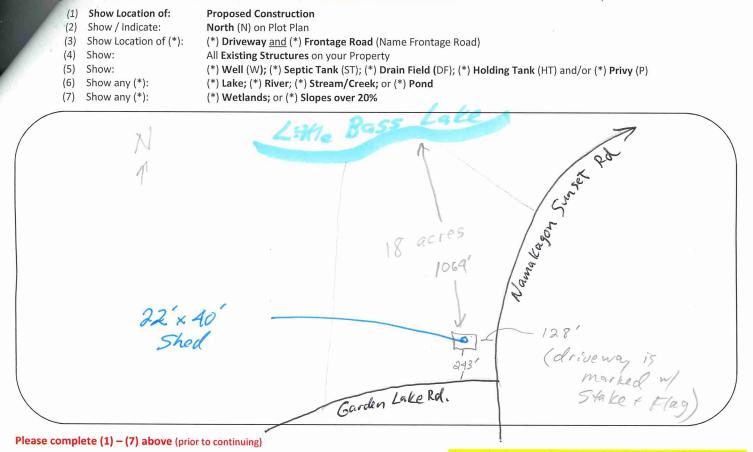
Bayfield Co. Zoning Dept.

INSTRUCTIONS: No permits will be issued until all fees are paid.

Checks are made payable to: Bayfield County Zoning Department.

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Address of Property:						City/Sta	ite/Zip:				1			Cell P	hone: /	608)	
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Authorized Agent: (F						Agent P				ress (include City	/State/Z	p):		5000000		orization	
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APPLICANT - PLEASE COMPLETE PLOT PLAN ON REVERSE SIDE



ox below: Draw or Sketch your Property (regardless of what you are applying for)

(8) Setbacks: (measured to the closest point)

Changes in plans must be approved by the Planning & Zoning Dept.

Description	Measureme	ent		Description	Measureme	nt
Setback from the Centerline of Platted Road	139	Feet		Setback from the Lake (ordinary high-water mark)	1064	Feet
Setback from the Established Right-of-Way	118	Feet		Setback from the River, Stream, Creek	na	Feet
				Setback from the Bank or Bluff	na	Feet
Setback from the <b>North</b> Lot Line	1300	Feet				
Setback from the <b>South</b> Lot Line	243	Feet		Setback from <b>Wetland</b>	na	Feet
Setback from the West Lot Line	450	Feet		20% Slope Area on the property	□ Yes 🔭 I	No
Setback from the <b>East</b> Lot Line	128	Feet	Mai	Elevation of Floodplain	200	Feet
				·		
Setback to Septic Tank or Holding Tank	na	Feet		Setback to Well	na	Feet
Setback to <b>Drain Field</b>	ng	Feet			-	
Setback to Privy (Portable, Composting)	ne	Feet			,	

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.

For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.

The local Town, Village, City, State or Federal agencies may also require permits.

Issuance Information (County Use Only)	Sanitary Number:		# of bedrooms:	Sanitary Date:			
Permit Denied (Date):	Reason for Denial:						
Permit #: 18-0095	Permit Date: 8-10	D-18					
Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming    Yes   (Deed of Record   Yes   Yes	ous Lot(s))	Mitigation Required Mitigation Attached		Affidavit Required Affidavit Attached Yes No			
Granted by Variance (B.O.A.)  ☐ Yes ☐ No Case #:		Previously Granted by ☐ Yes ✓ No	y Variance (B.O.A.)  Case	#:			
Was Parcel Legally Created Was Proposed Building Site Delineated ✓ Yes □ No		Were Property Line	es Represented by Owner Was Property Surveyed	☐ Yes ☐ No ☐ No			
Inspection Record:		1		Zoning District ( R-2 ) Lakes Classification ( 3 )			
Date of Inspection: 8-2-18	Inspected by:			Date of Re-Inspection:			
Condition(s): Town, Committee or Board Conditions Attac							
Signature of Inspector:	for human had necessary c	o accessory building bitation / sleeping put ounty and UDC rater shall enter the baction to POWTS. I acks.	permits. No	Date of Approval: <b>3/9/16</b>			
Hold For Sanitary:  Hold For TBA:  Hold For TBA:	Hold For Affid	lavit: 🗌	Hold For Fees: 🗌				

City, Village, State or Federal May Also Be Required

SANITARY - None SIGN -SPECIAL -CONDITIONAL -BOA -

## BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT ON THE PREMISES DURING CONSTUCTION

18-0295 **James & Sharon Stroschein** Issued To: No. Namakagon Location: **Township** 43 N. Range 5 W. Section Town of  $\frac{1}{4}$  of -2 & 4 Subdivision CSM# Gov't Lot Lot Block

For: Residential Principal Structure: [1-Story; Shed (22' x 40') = 880 sq. ft.]

(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): No accessory building shall be used for human habitation / sleeping purposes without necessary County and UDC permits. No pressurized water shall enter the building unless approved connection to POWTS. Must meet and maintain setbacks.

**NOTE:** This permit expires one year from date of issuance if the authorized construction work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval. This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.

This permit may be void or revoked if any performance conditions are not

completed or if any prohibitory conditions are violated.

**Tracy Pooler** 

**Authorized Issuing Official** 

August 10, 2018

Date